



DRINKING WATER ANALYSIS REPORTING FORM
RADIONUCLIDES (RADS)
Man-Made Beta Particles & Photon Emitters
 *** Entry Point to the Distribution System (EPDS) Only ***

***** PUBLIC WATER SYSTEM INFORMATION *****
 >>>> TO BE FILLED OUT BY SYSTEM PERSONNEL <<<<

[]
PWS ID Number

PWS Name

[] []:
Sample Date

[]:
Sample Time (24HR CLOCK)

Owner/Contact Person

Owner/Contact Email Address

()
Owner/Contact Phone Number

SAMPLE TYPE

- Reduced Monitoring
- Quarterly Monitoring

SAMPLE COLLECTION POINT

- Entry Point to the Distribution System [EPDS _____]

SAMPLE SITE ID []

If Composite of Four Quarterly Samples
 Date Q1 Collected []
 Date Q2 Collected []
 Date Q3 Collected []
 Date Q4 Collected []

***** RADIONUCLIDE ANALYSIS *****
 >>> TO BE COMPLETED BY LABORATORY PERSONNEL <<<

Analysis Method	MCL	Reporting Limit	Contaminant Name	Cont. Code	Analysis Run Date	Result	Exceeds MCL
_____	4 mrem/yr	4 pCi/L	Gross Beta	4100	_____	_____	<input type="checkbox"/>
_____	20,000 pCi/L	1,000 pCi/L	Tritium	4102	_____	_____	<input type="checkbox"/>
_____		10 pCi/L	Strontium-89	4172	_____	_____	
_____	8 pCi/L	2 pCi/L	Strontium-90	4174	_____	_____	<input type="checkbox"/>
_____		1 pCi/L	Iodine-131	4264	_____	_____	
_____		10 pCi/L	Cesium-134	4270	_____	_____	

***** LABORATORY INFORMATION *****
 >>> TO BE COMPLETED BY LABORATORY PERSONNEL <<<

[]
Specimen Number

Comment

[AZ]
Lab ID Number

Lab Name

Phone Number

Lab Contact, Printed Name

Authorized Signature

[]
PWS Notification Date

PWS Person Notified

Submit completed form to:
EMAIL: WQD.Compliance.Data@azdeq.gov -or- **MAIL:** ADEQ Water Quality Compliance Data Unit (MC 5415B-1),
For questions, go to: azdeq.gov/DWComplianceAssistance 1110 W. Washington St., Phoenix, AZ 85007.